

FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

**Title of
Invention**

METHOD AND DEVICE FOR PAINLESS INJECTION OF MEDICATION

Application Number :

Date :

First Named Applicant: Eric James Wall

Attorney Docket Number: CHM-005M

TOTAL FEE AUTHORIZED \$ 879

Patent fees are subject to annual revisions on or about October 1st of each year.

Filing as small entity

BASIC FILING FEE

Fee Description	Fee Code	Amount \$	Fee Paid \$
Utility Filing Fee	2001	375	375
Subtotal For Basic Filing Fees: \$ 375			

EXTRA CLAIM FEES

Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$
Total Claims : 48	28	2202	9	252
Independent Claims : 9	6	2201	42	252
Subtotal For Extra Claims Fees: \$ 504				

AUTHORIZED BILLING INFORMATION

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit account number: 502201
Deposit name: Children's Hospital Medical Center
Deposit authorized name: Loy M. White
Signature: /loymwhite/
Date (YYYYMMDD): 2003-09-12

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.